

Wisdom, Wealth, and Wellness Conference

For People Who Care About Their Physical, Emotional, and Financial Well-Being

Reginald F. Lewis Museum of Maryland African American History and Culture

September 11, 2011

Corporate Sponsor Levels and Benefits

- **Premier Sponsor \$3,000**
 1. Name and logo on Slade&Associates.com for 12 months
 2. Name and logo in the event program booklet
 3. Full page ad in the event program booklet
 4. Acknowledgement during the program
 5. Logo on publicity
 6. Vendor table for two representatives from your organization
 7. Name tag with “sponsor” ribbons
 8. Table for 10

- **Luncheon Sponsor \$1,500**
 1. Name and logo on Slade&Associates.com for 12 months
 2. Name and logo in the event program booklet
 3. Half page ad in the event program booklet
 4. Acknowledgement during the program
 5. Logo on publicity
 6. Name tag with “sponsor” ribbons
 7. Table for 10

- **Breakfast Sponsors \$500**
 1. Name and logo on Slade&Associates.com for 12 months
 2. Name and logo in the event program booklet
 3. Quarter page ad in the event program booklet
 4. Acknowledgement during the program
 5. Logo on publicity
 6. Name tag with “sponsor” ribbon
 7. Two registrations

- **TCE Speaker Sponsors \$300 (Sponsor “The Career Engineer”)**
 1. Name and logo in the event program booklet
 2. Business card sized ad in the event program booklet
 3. Acknowledgement during the program
 4. Name tag with “sponsor” ribbon
 5. One registration

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Name of Organization/Business: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone:(____)_____ Fax:(____)_____

Sponsor Level Selected: _____

Payment Information:

- by phone:** 301.922.5421
- by fax:** 301.805.1372 (fax registration form with cover sheet)
- by mail:** Slade&Associates, LLC
15480 Annapolis Road, Suite 202 - #412
Bowie, MD 20715
- online:** wisdomwealthwellness2.eventbrite.com

501(C)3 Organizations: Call 301.922.5421 for more information

Please make checks payable to: Slade&Associates, LLC

Credit Card Payments: Visa MasterCard

Card# _____ Exp. Date: _____

Authorized by (print name on card): _____

Signature: _____ Date: _____

I authorize the amount stated above to be charged to the credit card provided.

For more information please contact Phyllis Slade Martin, Owner: Phone (301) 922-5421; E-mail pslade@sladeandassociates.com; Fax (301)805-1372; wisdomwealthwellness2.eventbrite.com; www.sladeandassociates.com